

By Mr. MURKOWSKI, from the Committee on Energy and Natural Resources, with an amendment in the nature of a substitute:

S. 1127. A bill to establish the Vancouver National Historic Reserve, and for other purposes.

By Mr. MURKOWSKI, from the Committee on Energy and Natural Resources, with amendments:

S. 1649. A bill to extend contracts between the Bureau of Reclamation and irrigation districts in Kansas and Nebraska, and for other purposes.

By Mr. MURKOWSKI, from the Committee on Energy and Natural Resources, without amendment:

S. 1699. A bill to establish the National Cave and Karst Research Institute in the State of New Mexico, and for other purposes.

S. 1706. A bill to increase the amount authorized to be appropriated for assistance for highway relocation with respect to the Chickamauga and Chattanooga National Military Park in Georgia, and for other purposes.

S. 1809. A bill entitled the "Aleutian World War II National Historic Areas Act of 1996".

By Mr. MURKOWSKI, from the Committee on Energy and Natural Resources, with an amendment:

S. 1844. A bill to amend the Land and Water Conservation Fund Act to direct a study of the opportunities for enhanced water-based recreation, and for other purposes.

By Mr. MURKOWSKI, from the Committee on Energy and Natural Resources, with an amendment in the nature of a substitute:

S. 1921. A bill to authorize the Secretary of the Interior to transfer certain facilities at the Minidoka project to the Burley Irrigation District, and for other purposes.

S. 1986. A bill to provide for the completion of the Umatilla Basin project, and for other purposes.

By Mr. MURKOWSKI, from the Committee on Energy and Natural Resources, without amendment:

S. 2015. A bill to convey certain real property located within the Carlsbad project in New Mexico to the Carlsbad Irrigation District.

Mr. HATCH, from the Committee on the Judiciary:

Report to accompany the bill (S. 1952) to amend the Juvenile Justice and Delinquency Prevention Act of 1974, and for other purposes (Rept. 104-369).

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second time by unanimous consent, and referred as indicated:

By Mr. CHAFEE (for himself and Mr. ROCKEFELLER):

S. 2075. A bill to amend title XVIII of the Social Security Act to provide additional consumer protections for medicare supplemental insurance; to the Committee on Finance.

By Mr. MURKOWSKI:

S. 2076. A bill to increase economic benefits to the United States from the activities of cruise ships visiting Alaska; to the Committee on Commerce, Science, and Transportation.

By Mr. LUGAR (for himself and Mr. LEAHY):

S. 2077. A bill to amend the Commodity Exchange Act to improve the act, and for other purposes; to the Committee on Agriculture, Nutrition, and Forestry.

By Mr. BINGAMAN (for himself, Mr. KEMPTHORNE, and Mr. CRAIG):

S. 2078. A bill to authorize the sale of excess Department of Defense aircraft to facilitate the suppression of wildfire; to the Committee on Armed Services.

By Mr. MOYNIHAN:

S. 2079. A bill to repeal the prohibition against State restrictions on communications between government agencies and the INS; to the Committee on the Judiciary.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. CHAFEE (for himself and Mr. ROCKEFELLER):

S. 2075. A bill to amend title XVIII of the Social Security Act to provide additional consumer protections for medicare supplemental insurance; to the Committee on Finance.

THE MEDIGAP PORTABILITY ACT OF 1996

• Mr. CHAFEE. Mr. President, last month, the President signed into law bipartisan legislation that provides greater portability of health insurance for working Americans. Today, I join with my colleague, Senator ROCKEFELLER, in the introduction of a bipartisan bill that will provide some of the same guarantees for seniors who buy Medicare supplemental insurance or Medigap policies.

Of the 37 million Medicare beneficiaries, 80 percent, or nearly 30 million, have some form of Medicare supplemental insurance, whether covered through a retiree health plan or a private Medigap policy. Under current law, Medigap insurers must issue these policies without pre-existing condition limitations during the 6-month period immediately after the beneficiary becomes eligible for Medicare. Our bill does three things for seniors who have purchased Medigap insurance.

First, it guarantees that if their plan goes out of business or the beneficiary moves out of a plan service area, he or she can buy another comparable policy. These rules also would apply to a senior who has had coverage under a retiree health plan if their plan goes out of business.

Second, it encourages seniors to enroll in Medicare managed care by guaranteeing that they can return to Medicare fee-for-service and, during the first year of enrollment, get back their same Medigap policy if they decide they do not like managed care. Under current law, if a senior wishes to enroll in a Medicare managed care plan, they have two options. They may drop their Medigap policy, and hope they can get another if they go back to fee-for-service, or they can continue paying their Medigap premiums in the event that they may need the policy again some day—a very costly option for those on fixed incomes.

Third, it provides a 6-month open enrollment period for those under 65 who become Medicare beneficiaries because they are disabled. Under current Federal law, Medicare beneficiaries are offered a 6-month open enrollment period only if they are 65. There are approximately 4 million Americans who are under 65 years of age and are enrolled

in the Medicare Program. Currently, they do not currently have access to Medigap policies unless State laws require insurers to offer policies to them.

It is true that this bill does not go as far as some advocacy groups would like. Our bill leaves to the States more controversial issues, such as continuous open enrollment and community rating of Medigap premiums. I believe, however, that this legislation will provide seniors the same guarantees that we provided to working Americans under the Kassebaum-Kennedy legislation. Thank you, Mr. President.

I ask unanimous consent that the text of the bill be included in the RECORD immediately following my remarks.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 2075

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Medigap Portability Act of 1996".

SEC. 2. MEDIGAP AMENDMENTS.

(a) GUARANTEEING ISSUE WITHOUT PRE-EXISTING CONDITIONS FOR CONTINUOUSLY COVERED INDIVIDUALS.—Section 1882(s) of the Social Security Act (42 U.S.C. 1395ss(s)) is amended—

(1) in paragraph (3), by striking "paragraphs (1) and (2)" and inserting "this subsection";

(2) by redesignating paragraph (3) as paragraph (4), and

(3) by inserting after paragraph (2) the following new paragraph:

"(3)(A) The issuer of a medicare supplemental policy—

"(i) may not deny or condition the issuance or effectiveness of a medicare supplemental policy described in subparagraph (C);

"(ii) may not discriminate in the pricing of the policy on the basis of the individual's health status, medical condition (including both physical and mental illnesses), claims experience, receipt of health care, medical history, genetic information, evidence of insurability (including conditions arising out of acts of domestic violence), or disability; and

"(iii) may not impose an exclusion of benefits based on a pre-existing condition,

in the case of an individual described in subparagraph (B) who seeks to enroll under the policy not later than 63 days after the date of the termination of enrollment described in such subparagraph.

"(B) An individual described in this subparagraph is an individual described in any of the following clauses:

"(i) The individual is enrolled with an eligible organization under a contract under section 1876 or with an organization under an agreement under section 1833(a)(1)(A) and such enrollment ceases either because the individual moves outside the service area of the organization under the contract or agreement or because of the termination or nonrenewal of the contract or agreement.

"(ii) The individual is enrolled with an organization under a policy described in subsection (t) and such enrollment ceases either because the individual moves outside the service area of the organization under the policy, because of the bankruptcy or insolvency of the insurer, or because the insurer closes the block of business to new enrollment.